

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L01000001771

1. Entity Name  
MILL POND, LLC



Principal Place of Business  
1525 WEST HILLSBOROUGH AVE.  
TAMPA, FL 33603

Mailing Address  
1525 WEST HILLSBOROUGH AVE.  
TAMPA, FL 33603



04222008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3702761

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

REIBER, SAM I ESQ.  
601 E. TWIGGS ST., STE. 200  
TAMPA, FL 33602

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000936911  
05/27/08-80029-005 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGR  
NAME ARTZIBUSHEV HOLDINGS, INC  
STREET ADDRESS 1525 WEST HILLSBOROUGH AVE.  
CITY-ST-ZIP TAMPA, FL 33603

TITLE MGR  
NAME DIBBS, STEPHEN J  
STREET ADDRESS 5277 EHRLICH RD.  
CITY-ST-ZIP TAMPA, FL 33624

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

ARTZIBUSHEV HOLDINGS, INC

Sam I Reiber Managing Member

4/28/08 813-237-0529